



Evanston Community Tennis Association 2010 Membership Form

To become a member of ECTA and support Evanston Tennis, please fill out the form below and mail to the address listed below:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone (home): _____ Phone (work): _____

Email: _____ Birth date: _____

Membership Renewal (check): Adult: \$15.00 Junior (under 18 yrs): \$5.00

Please return this form with your check payable to ECTA to: Roger Allen
1321 Elmwood Avenue
Evanston, IL 60201

Current USTA NTRP rating: _____

High school / college team experience (school, years, level and record): _____

Tournament experience (list recent tournaments and results): _____

Would you be interested in volunteering for future tournaments, clinics or working on the ECTA board?

Yes:

No:

Would you be interested in being contacted by ECTA about helping to host a tennis event for your company or organization?

Yes:

No:

Would you be interested in being contacted by ECTA about your company or organization sponsoring an ECTA Tournament or Fundraiser?

Yes:

No:

Would your child be interested in a youth tennis program?

Yes:

No:

Can you recommend a friend who would like to become an ECTA member?